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## BIB DATA SHEET

CONFIRMATION NO. 3623

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/802,282	03/17/2004 RULE	514	1623	223467
<b>APPLICANTS</b> Byung Ho Woo, Schaumburg, IL; K. Keith Kwok, Long Grove, IL; Kang Yong Yang, Flossmoor, IL;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/03/2004				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/ELLU PESELEV/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance E.P. <u>Initials</u>	<b>STATE OR COUNTRY</b>  IL	<b>SHEETS DRAWINGS</b>  0	<b>TOTAL CLAIMS</b>  61
<b>INDEPENDENT CLAIMS</b>  6				
<b>ADDRESS</b>  LEYDIG VOIT & MAYER, LTD TWO PRUDENTIAL PLAZA, SUITE 4900 180 NORTH STETSON AVENUE CHICAGO, IL 60601-6731 UNITED STATES				
<b>TITLE</b>  Lyophilized azithromycin formulation				
<b>FILING FEE RECEIVED</b>  2096	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	